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APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	Α	TTORNE	Y DOCKET NO.	CONFIRMATION NO.
10/708,585			Blayn W. Beenau		03292.101110.1 2584		
TITLE OF INVENTION	SYSTEMS AND MET	HODS FOR MANAGING	G MULTIPLE ACCOUNT	S ON A RF TRANS.			-
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE F	EE T	OTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0		\$1700	08/13/2007
EXAM	INER	ART UNIT	CLASS-SUBCLASS				
VY, HU	JNG T	2163	340-010100				
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custome Number is required.			or agents OR, alternative (2) the name of a single registered attorney or a 2 registered patent attorney on a listed, no name will be	of up to 3 registered patent attorneys alternatively, of a single firm (having as a member a mey or agent) and the names of up to attent attorneys or agents. If no name is e will be printed. Harper & Scinto 2 3 3 3			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) American Express Travel Related Services Company, Inc. New York, NY Please check the appropriate assignee category or categories (will not be printed on the patent): Individual XX Corporation or other private group entity Government							
4a. The following fee(s) are submitted: \$\times \text{ Issue Fee} \text{ A check is enclosed.} \text{ Payment of Fec(s): (Please first reapply any previously paid issue fee shown above)} \text{ A check is enclosed.} \text{ Payment by credit card. Form PTO-2038 is attached.} \text{ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number \(\frac{06-1205}{06-1205} \) (enclose an extra copy of this form							
MOTE, The Jeans For at	ns SMALL ENTITY stat	us. See 37 CFR 1.27.	b. Applicant is no lor	nger claiming SMALl	L ENTIT	TY status. See 37 Clorney or agent; or th	FR 1.27(g)(2). ne assignee or other party in
	11	Ro. LL		July Date	2.0 Ju	ine 5 , 2007	
Authorized Signature Jonathan Berschadsky Typed or printed name Jonathan Berschadsky			8	Registration No	o46	5,551	Management of the state of the
This collection of inform	mation is required by 37 initiality is governed by 3 ed application form to the tions for reducing this by Virginia 22313-1450. D	CFR 1.311. The informat 5 U.S.C. 122 and 37 CFF ie USPTO. Time will var urden, should be sent to t O NOT SEND FEES OR	ion is required to obtain or R 1.14. This eollection is es y depending upon the indi he Chief Information Offic COMPLETED FORMS T	retain a benefit by the stimated to take 12 m vidual case. Any cor- ter, U.S. Patent and 1 O THIS ADDRESS.	e public inutes to nments of rademants SEND	which is to file (and	d by the USPTO to process) ag gathering, preparing, and me you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450,